



## PART B - FEE(S) TRANSMITTAL

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26433 7590 02/01/2006

**BAKER & MCKENZIE LLP**  
**1114 AVENUE OF THE AMERICAS**  
**NEW YORK, NY 10036**

05/01/2006 HDEHES2 00000008 020393 10053130

01 FC:2501 700.00 DA  
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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

**James David Jacobs** (Depositor's name)  
*James David Jacobs* (Signature)  
**April 28, 2006** (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/033,130	11/13/2001	Orly Yadid-Pecht	58156628-2	6363

**TITLE OF INVENTION: METHOD AND APPARATUS FOR PROVIDING ADAPTIVE MULTIPLE RESOLUTION OF OPTICAL IMAGERS**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	05/01/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
DANG, DUJY M	2627	3B2-232000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
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1 Baker & McKenzie LLP  
 2 \_\_\_\_\_  
 3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Orly YADID-PECHT**

**Israel**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☒ Individual ☐ Corporation or other private group entity ☐ Government

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- ☒ Issue Fee  
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

**James David Jacobs**

Typed or printed name

Date **April 28, 2006**

Registration No. **24, 299**

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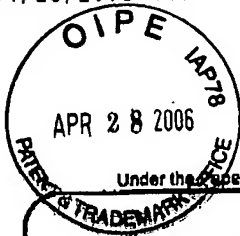
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<b>From</b>	James D. Jacobs	+1 212 891 3951	+1 212 310 1651
<b>Client/Matter No.</b>	56156628-2		
<b>Re</b>	Application No.: 10/053,130		
<b>Pages (w/cover)</b>	3		

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	56156628-2
Filing Date	10/053,130
First Named Inventor	Orly Yadid-Pecht
Art Unit	2627
Examiner Name	D.M. Dang
Attorney Docket Number	56156628-2

## ENCLOSURES (Check all that apply)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Payment of Issue Fee (Form PTOL-85 Part B) |
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### Remarks

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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Baker & McKenzie LLP		
Signature			
Printed name	James David Jacobs		
Date	April 28, 2006	Reg. No.	24,299

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Signature			
Typed or printed name	James David Jacobs	Date	April 28, 2006

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